

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 10/690,653

Confirmation No.: 5864

Applicant(s): Shiping WANG et al.

Group Art Unit: 1773

Examiner: Kevin M. Bernatz

Filed: October 21, 2003

For: COATING COMPOSITION FOR SKIN-CONTACTING SURFACE OF
ELASTOMERIC ARTICLE AND ARTICLES CONTAINING THE SAME**PETITION AND FEE FOR EXTENSION OF TIME (37 C.F.R. § 1.136(a))**Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. This is a petition for an extension of time for Notice of Appeal
2. The communication in connection with the matter for which this extension is requested

☒ is filed herewith.☐ has been filed on _____.

3. ☐ Applicant(s) is/are entitled to Small Entity Status.

☐ Statement has already been filed

- | | | | | |
|----|-------------------------------------|-----------------------------------|--|---------------------------------|
| 4. | | Total Months
Requested | Fee for Other
than Small Entity | Fee for
Small Entity |
| a. | <input type="checkbox"/> | one month | \$120.00 | \$60.00 |
| b. | <input type="checkbox"/> | two months | \$460.00 | \$230.00 |
| c. | <input checked="" type="checkbox"/> | three months | \$1,050.00 | \$525.00 |
| d. | <input type="checkbox"/> | four months | \$1,640.00 | \$820.00 |
| e. | <input type="checkbox"/> | five months | \$2,230.00 | \$1,115.00 |

Adjustment date: 05/22/2008 CKHLOK
 01/18/2008 INTEFSW 00001756 134500 10690653
 02-FC:1253 1050.00 CR

- f. ☐ An extension for _____ months has already been secured for filing the above-identified communication and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested. The fee for this extension (\$_____), minus the fee previously paid (\$_____) equals \$_____ (total fee due).
5. ☐ A check in the amount of \$_____ to cover the extension fee is attached.
6. ☒ Charge fee to Deposit Account No. 13-4500, Order No. 2877-4040.
7. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required by this paper, or credit any overpayment to Deposit Account No. 13-4500. Order No. 2877-4040.

Respectfully submitted,
MORGAN & FINNEGAN, L.L.P.



Andrew D. Cohen
Registration No. 61,508

Dated: January 17, 2008

Correspondence Address:

Address Associated With Customer

Number:

27123

(212) 415-8700

(212) 415-8701

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Facsimile

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																
1 Date of Request: 05/21/08				2 Serial/Patent # 10/690,653												
3 Please refund the following fee(s):				4 PAPER NUMBER		5 DATE FILED		6 AMOUNT								
	Filing							\$								
	Amendment							\$								
X	Extension of Time 1253					01/17/08		\$ 1,050.00								
	Notice of Appeal/Appeal							\$								
	Petition							\$								
	Issue							\$								
	Cert of Correction/Terminal Disc.							\$								
	Maintenance							\$								
	Assignment							\$								
	Other							\$								
				7 TOTAL AMOUNT OF REFUND				\$ 1,050.00								
				8 TO BE REFUNDED BY:												
				Treasury Check												
				X Credit Deposit A/C #:												
				9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">4</td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> </tr> </table>						1	3	--	4	5	0	0
1	3	--	4	5	0	0										
10 REASON:																
	Overpayment															
	Duplicate Payment															
X	No Fee Due (Explanation):															
The extension of time period is over, no extension fee is due.																
11 REFUND REQUESTED BY:																
TYPED/PRINTED NAME: Irvin Dingle				TITLE: Paralegal												
SIGNATURE:				PHONE: 2-3210												
OFFICE: Petitions																
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****																
APPROVED:				DATE: 5/22/08												

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**